

ULHASNAGAR MUNICIPAL CORPORATION CITIZEN FACILITATION CENTRE

SUBJECT: CERTIFIC	ATE OF AREA-AFFECTED IN THE ROAD WIDENING						
T 1 N 1 /F O(() 1	7 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Token Number (For Office)	Jse)						
	Date:- / /						
Citizen Identification Nu	mber						
(If Citizen Iden	tification Number is given, do not fill below Details)						
Applicant's Details:							
Last Name/ Surname	Name Father/Husband's Name						
Details of Society (If Applicat	ion from Cocietaly						
Details of Society (If Applicat Name Of Society:	ion from Society):						
Designation							
Address:							
Head House/Building/Soc. Name:	Information						
Flat/Block/Barrack No.:	Wing/Floor:						
Road/Street/Lane:	Willig/ Floor.						
Area/Locality/Town/City:	Taluka:						
Pin code:							
Ward Committee No.:	1[]2[]3[]4[]						
Electrol Panel No.:							
Telephone No. (if any):	Contact Person:						
Email Address (if any):							
	Information of Property:						
Head Type of Property	Information [] Land [] Building						
(Please Tick [✓] as applicable)	[] Land [] Bunding						
Name of original owner							
Property No. (Computerized)							
Town/City:	Taluka:						
Survey/Block/Barrack No.:							
C.T.S. No.:							
Part No./Sheet No.:							
Plot No./Unit No.:							
Area of Land (sq.mtr.)							
Road/Street/Lane:							
Ward Committee No.:	1[]2[]3[]4[]						

	Nec	essary Partic	ulars abo	ut abov	e service	2:			
	Head				ticulars				
1	Outward number and da								
	given by UMC for acquir	ing land for							
	road widening purpose.								
			Date:			No.:			
2	Area of land acquired by	UMC for							
	road widening (Sq.Mtr) Necessary Enclosi	ures related to	ahove ar	nlication	ı are enc	losed as i	under		
	•	osed tick [✓		-	d tick [unuci.	•	
	(II CIICI	Enclosures		CHCIOSC	u tick [^])		Yes/No	
1 Location map & certificate from the concerned Executive/Deputy								[]	
	Engineer of the Corporation					,		L J	
		De	eclarati	on					
	I/We					state on s	olemn	affirmation	
	that the above information	on is true and	d correct	with th	e best o	f my kr	owled	lge. If the	
	information given is found					-			
	information given is found	wrong then i/	vve silali	be field i	egany na	Die ioi its	COLISE	quences.	
	Date:- Applicant's Signature							ire	
			()	
	The document may plea	se be deliver	ed to:-						
	1 Self/Nominated Pe	rson []	a) C.F.	C. []	b) Cam	ıp No. [1		
	Name of Nominate)	
	2 By Post	<u> </u>						 ,	
	a) U.P.C. []	ь\ D	Register A	ם מ					
	,	D) N	register A	.D. []					
	3 Courier []								
	(Not to be filled if addre		above)						
	Correspondence Address:-	•							
Last Name/ Surname Na			ame	me Father/H			Husband Name		
Н	Iouse/Building/Soc. Name:								
F	lat/Block/Barrack No.:			Wir	ng/Floor:				
R	oad/Street/Lane:								
A	rea/Locality/Town/City:					Taluka:			
	2007 2000010 77 10 11 11 11 11 11 11								
	in code:								